**UNIVERSITY OF ENGINEERING & TECHNOLOGY, PESHAWAR**

**Department of Computer Science and Information Technology**

Tele: - (091) 9222276 Fax No: - (091) 9216663

**Form I (Make Up Exam Arrangement/ Award of “I” Grade Form)**

Name: Registration No:

Semester: Term:- (MID/Final)

Course Name

Course Instructor:

Exam Date Time:-

Reason for exam arrangement:

Remarks (if any)

**Student Sign Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Note:-

1. Student concerned will be responsible for any misinformation provided in this form.

2. Make up exam will be arranged in case of emergency only

3. Attach the emergency medical documents of Govt. hospitals only.

4. “I” Grade shall be awarded in case a student fails to appear in Final Term Exam for genuine reason.

**(For Office Use Only)**

Diary/ Dispatch No:- Dated

Action By: Action Date: